

---

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Reliance Standard Life Insurance Company
<b>TOI/Sub-TOI:</b>	H11G Group Health - Disability Income/H11G.003 Long Term		
<b>Product Name:</b>	Group long term disability income		
<b>Project Name/Number:</b>	Pre-existing Condition Benefit/LRS-6564R		

## Filing at a Glance

Company:	Reliance Standard Life Insurance Company
Product Name:	Group long term disability income
State:	District of Columbia
TOI:	H11G Group Health - Disability Income
Sub-TOI:	H11G.003 Long Term
Filing Type:	Rate
Date Submitted:	12/24/2013
SERFF Tr Num:	RSLI-129351857
SERFF Status:	Closed-APPROVED
State Tr Num:	
State Status:	
Co Tr Num:	LRS-6564R
Implementation	On Approval
Date Requested:	
Author(s):	Richard Vogenitz
Reviewer(s):	Donghan Xu (primary), Alula Selassie
Disposition Date:	01/06/2014
Disposition Status:	APPROVED
Implementation Date:	01/06/2014

State Filing Description:

---

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Reliance Standard Life Insurance Company
<b>TOI/Sub-TOI:</b>	H11G Group Health - Disability Income/H11G.003 Long Term		
<b>Product Name:</b>	Group long term disability income		
<b>Project Name/Number:</b>	Pre-existing Condition Benefit/LRS-6564R		

## General Information

Project Name: Pre-existing Condition Benefit

Project Number: LRS-6564R

Requested Filing Mode: Review &amp; Approval

Explanation for Combination/Other:

Submission Type: New Submission

Group Market Type:

Filing Status Changed: 01/06/2014

State Status Changed:

Created By: Richard Vogenitz

Corresponding Filing Tracking Number:

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Small and Large

Overall Rate Impact:

Deemer Date:

Submitted By: Richard Vogenitz

Filing Description:

Filing changes to the manual rating factors affecting our Simplified LTD rating (previously called Small group rating and used only for groups under 20 lives).

## Company and Contact

### Filing Contact Information

Richard Vogenitz, Senior Compliance  
Specialist

richard.vogenitz@rsli.com

2001 Market Street

800-351-7500 [Phone] 4228 [Ext]

Suite 1500

267-256-3546 [FAX]

Philadelphia, PA 19130-7090

### Filing Company Information

Reliance Standard Life Insurance  
Company

CoCode: 68381

State of Domicile: Illinois

2001 Market Street

Group Code: 3098

Company Type:

Suite 1500

Group Name:

State ID Number:

Philadelphia, PA 19103-7090

FEIN Number: 36-0883760

(800) 351-7500 ext. [Phone]

---

## Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

State:	District of Columbia	Filing Company:	Reliance Standard Life Insurance Company
TOI/Sub-TOI:	H11G Group Health - Disability Income/H11G.003 Long Term		
Product Name:	Group long term disability income		
Project Name/Number:	Pre-existing Condition Benefit/LRS-6564R		

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	Donghan Xu	01/06/2014	01/06/2014

### Objection Letters and Response Letters

#### Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Donghan Xu	01/06/2014	01/06/2014
Pending Industry Response	Donghan Xu	01/03/2014	01/03/2014

#### Response Letters

Responded By	Created On	Date Submitted
Richard Vogenitz	01/06/2014	01/06/2014
Richard Vogenitz	01/06/2014	01/06/2014

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Reliance Standard Life Insurance Company
<b>TOI/Sub-TOI:</b>	H11G Group Health - Disability Income/H11G.003 Long Term		
<b>Product Name:</b>	Group long term disability income		
<b>Project Name/Number:</b>	Pre-existing Condition Benefit/LRS-6564R		

## Disposition

Disposition Date: 01/06/2014  
Implementation Date: 01/06/2014  
Status: APPROVED

Comment:

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Reliance Standard Life Insurance Company	0.000%	0.000%	\$0	0	\$387,694	0.000%	0.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Cover Letter All Filings		Yes
Supporting Document	Certificate of Authority to File		Yes
Supporting Document	Actuarial Memorandum		Yes
Supporting Document	Actuarial Justification		Yes
Supporting Document	District of Columbia and Countrywide Loss Ratio Analysis (P&C)		Yes
Supporting Document	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)		Yes
Supporting Document	Actuarial Memorandum and Certifications		Yes
Supporting Document	Unified Rate Review Template		Yes
Rate	rate manual pages		Yes

**State:** District of Columbia **Filing Company:** Reliance Standard Life Insurance Company  
**TOI/Sub-TOI:** H11G Group Health - Disability Income/H11G.003 Long Term  
**Product Name:** Group long term disability income  
**Project Name/Number:** Pre-existing Condition Benefit/LRS-6564R

## Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	01/06/2014
Submitted Date	01/06/2014
Respond By Date	01/20/2014

---

Dear Richard Vogenitz,

### **Introduction:**

### **Objection 1**

- Actuarial Memorandum (Supporting Document)

Comments: Please specify what "other expenses" are.

### **Conclusion:**

Sincerely,  
Donghan Xu

---

**State:** District of Columbia **Filing Company:** Reliance Standard Life Insurance Company  
**TOI/Sub-TOI:** H11G Group Health - Disability Income/H11G.003 Long Term  
**Product Name:** Group long term disability income  
**Project Name/Number:** Pre-existing Condition Benefit/LRS-6564R

---

## Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	01/03/2014
Submitted Date	01/03/2014
Respond By Date	01/17/2014

---

Dear Richard Vogenitz,

### **Introduction:**

#### **Objection 1**

- Actuarial Memorandum (Supporting Document)

Comments: Please provide us with each part of expenses as percentage of total premium. Also, what are your anticipated loss ratio and normal premium?

### **Conclusion:**

Sincerely,  
Donghan Xu

---

**State:** District of Columbia **Filing Company:** Reliance Standard Life Insurance Company  
**TOI/Sub-TOI:** H11G Group Health - Disability Income/H11G.003 Long Term  
**Product Name:** Group long term disability income  
**Project Name/Number:** Pre-existing Condition Benefit/LRS-6564R

---

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	01/06/2014
Submitted Date	01/06/2014

---

Dear Donghan Xu,

**Introduction:**

Dear Donghan Xu,

**Response 1**

**Comments:**

acquisition and enrollment  
premium administration and billing  
claims administration  
business overhead

**Related Objection 1**

Applies To:

- Actuarial Memorandum (Supporting Document)

Comments: Please specify what "other expenses" are.

**Changed Items:**

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

**Conclusion:**

Sincerely,

Rick Vogenitz

Sincerely,

Richard Vogenitz

**State:** District of Columbia **Filing Company:** Reliance Standard Life Insurance Company  
**TOI/Sub-TOI:** H11G Group Health - Disability Income/H11G.003 Long Term  
**Product Name:** Group long term disability income  
**Project Name/Number:** Pre-existing Condition Benefit/LRS-6564R

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 01/06/2014  
Submitted Date 01/06/2014

Dear Donghan Xu,

### **Introduction:**

Dear Donghan Xu,

### **Response 1**

#### **Comments:**

The anticipated loss ratio for this policy form is estimated to be 72%. The expense and other loads used in developing gross manual rates for this policy form are as follows:

Expense Item	% of Premium
Premium Taxes, Licenses, and Fees	3.0%
Commission and Brokerage	10.0%
Other Expenses	13.0%
Profit and Risk Charges	2.0%

Since this is an annually rated group policy, the anticipated loss ratio does not vary by duration or by year of issue. The total annualized in-force premium for this policy form is \$289,047,277.

### **Related Objection 1**

Applies To:

- Actuarial Memorandum (Supporting Document)

Comments: Please provide us with each part of expenses as percentage of total premium. Also, what are your anticipated loss ratio and normal premium?

### **Changed Items:**

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

### **Conclusion:**

Sincerely,

Rick Vogenitz

Sincerely,

Richard Vogenitz



<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Reliance Standard Life Insurance Company
<b>TOI/Sub-TOI:</b>	H11G Group Health - Disability Income/H11G.003 Long Term		
<b>Product Name:</b>	Group long term disability income		
<b>Project Name/Number:</b>	Pre-existing Condition Benefit/LRS-6564R		

## Rate Information

Rate data applies to filing.

<b>Filing Method:</b>	SERFF
<b>Rate Change Type:</b>	Neutral
<b>Overall Percentage of Last Rate Revision:</b>	4.300%
<b>Effective Date of Last Rate Revision:</b>	11/23/2012
<b>Filing Method of Last Filing:</b>	

## Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Reliance Standard Life Insurance Company	0.000%	0.000%	\$0	0	\$387,694	0.000%	0.000%

<b>State:</b>	<i>District of Columbia</i>	<b>Filing Company:</b>	<i>Reliance Standard Life Insurance Company</i>
<b>TOI/Sub-TOI:</b>	<i>H11G Group Health - Disability Income/H11G.003 Long Term</i>		
<b>Product Name:</b>	<i>Group long term disability income</i>		
<b>Project Name/Number:</b>	<i>Pre-existing Condition Benefit/LRS-6564R</i>		

## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		rate manual pages	LRS-6564	Revised	Previous State Filing Number: RSLI-128717028 Percent Rate Change Request: 4.3	LTD Simplified Rating Manual.pdf,

## **Appendix F**

### **Simplified LTD Rating**

<b>Table</b>	<b>Description</b>	<b>Page</b>
<b>F1</b>	<b>Base Rates</b>	<b>F1</b>
<b>N/A</b>	<b>Rating Adjustments</b>	<b>F1</b>
<b>F2</b>	<b>SIC Categories</b>	<b>F2</b>

## Simplified LTD Rating

**Table F1 - Base Monthly Rates per \$100 of Covered Salary**

Age Band	Elimination Period		
	60 days	90 days	180 days
< 30	0.67	0.39	0.30
30-34	0.81	0.51	0.39
35-39	1.05	0.60	0.47
40-44	1.24	0.77	0.60
45-49	1.80	1.11	0.86
50-54	2.57	1.59	1.28
55-59	3.28	2.10	1.67
60-64	4.32	2.82	2.22
65+	4.89	3.25	2.48

The base rates above apply to the following standard plan design:

- Benefit Amount equal to 60% of Basic Monthly Earnings
- Benefit Period to SSNRA
- Full Social Security Integration
- 24 months Mental/Nervous Limit
- 24 months Drug & Alcohol Limit
- 12/12 Pre-Existing Condition Limitation
- Definition of Disability of 36 months Own Occ
- Partial and Residual Disability

**Notes:**

- The above rates are multiplied by a factor of:
  - 0.90 for cases having 10-19 eligible employees
  - 0.75 for cases having 20-29 eligible employees
  - 0.70 for cases having 30-49 eligible employees
  - 0.65 for cases having 50+ eligible employees.
- The above table contains the rates for cases having an SIC code contained in rating category B. These rates are multiplied by a factor of:
  - 0.80 for cases with an SIC code contained in rating category A
  - 1.40 for cases with an SIC code contained in rating category C.

The mapping of SIC codes into the three rating categories is shown in Table F2.

- The above rates are multiplied by a factor of 2 when coverage is employee paid. Other funding arrangements may merit separate consideration.

# Simplified LTD Rating

Table F2 - Mapping of SIC Codes to Rating Categories

SIC Code Range		Rating Category*
Start	End	
111	724	N/A
741	752	B
761	1499	N/A
1521	1542	B
1611	1629	N/A
1711	1752	B
1761	1799	N/A
2011	2099	B
2111	2141	N/A
2211	2399	B
2411	2431	N/A
2434	2599	B
2611	2631	N/A
2652	2679	B
2711	2796	A
2812	2824	B
2833	2836	A
2841	2891	B
2892	2892	N/A
2893	2899	B
2911	2999	C
3011	3089	B
3111	3291	C
3292	3292	N/A
3295	3479	C
3482	3489	N/A
3491	3499	C
3511	3799	B
3812	3999	A
4011	4231	C
4311	4311	N/A
4412	4492	C
4493	4493	N/A
4499	4581	C
4612	4619	N/A
4724	4941	B
4952	4959	N/A
4961	5271	B
5311	5531	C
5541	5541	N/A
5551	5736	C
5812	5813	C
5912	5912	C
5921	5921	N/A
5932	5963	C
5983	5989	N/A
5992	5999	C
6011	6163	A
6211	6289	C
6311	6799	A
7011	7041	N/A
7211	7299	B
7311	7319	A
7322	7363	B
7371	7379	A
7381	7381	N/A
7382	7841	B
7911	7999	N/A
8011**	8099**	C
8111	8111	B
8211	8299	A
8322	8422	C
8611	8748	A
8811	8811	N/A
8999	8999	C
9111	9211	B
9221	9221	N/A
9222	9222	B
9223	9229	N/A
9311	9661	B
9711	9721	N/A
9999	9999	B

\* SIC codes with a rating category "N/A" are not eligible for coverage.

\*\* For SIC codes 8011-8099: for cases under 20 lives, high-risk physician specialties (Anesthesiologists, Urologists, Surgeons (excluding Plastic Surgeons), Orthopedic/Sports Medicine Doctors, Otolaryngologists (Ear, Nose and Throat Specialists), and OB-GYNs) are not eligible for coverage.

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Reliance Standard Life Insurance Company
<b>TOI/Sub-TOI:</b>	H11G Group Health - Disability Income/H11G.003 Long Term		
<b>Product Name:</b>	Group long term disability income		
<b>Project Name/Number:</b>	Pre-existing Condition Benefit/LRS-6564R		

## Supporting Document Schedules

<b>Satisfied - Item:</b>	Cover Letter All Filings
<b>Comments:</b>	
<b>Attachment(s):</b>	DC_cover letter.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Certificate of Authority to File
<b>Bypass Reason:</b>	not applicable
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Memorandum
<b>Comments:</b>	
<b>Attachment(s):</b>	DC_ActMemo.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Actuarial Justification
<b>Bypass Reason:</b>	not applicable
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
<b>Bypass Reason:</b>	not applicable
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
<b>Bypass Reason:</b>	not applicable
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Reliance Standard Life Insurance Company
<b>TOI/Sub-TOI:</b>	H11G Group Health - Disability Income/H11G.003 Long Term		
<b>Product Name:</b>	Group long term disability income		
<b>Project Name/Number:</b>	Pre-existing Condition Benefit/LRS-6564R		

<b>Bypassed - Item:</b>	Actuarial Memorandum and Certifications
<b>Bypass Reason:</b>	not applicable
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Unified Rate Review Template
<b>Bypass Reason:</b>	not applicable
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

December 24, 2013

Re: **Reliance Standard Life Insurance Company**  
**Group Long Term Disability Income - Rate Filing**  
**LRS-6564R**

We are submitting revised rate manual pages affecting our Simplified LTD rating (previously called Small Group rating and used only for groups under 20 lives). No existing DC policyholders are impacted by the change. The rates will become effective upon approval.

Sincerely,

**Rick**  
**Vogenitz**  
Rick Vogenitz  
Sr. Compliance Analyst

Digitally signed by Rick Vogenitz  
DN: cn=Rick Vogenitz, o=RSL,  
ou=Compliance,  
email=richard.vogenitz@rsli.com  
, c=US  
Date: 2013.12.24 10:07:20 -05'00'



**RELIANCE STANDARD LIFE INSURANCE COMPANY**  
**Group Long Term Disability Insurance**  
**Policy Form LRS-6564 et al.**

**Actuarial Memorandum**

**(1) Purpose and Scope**

The purpose of this memorandum is to document changes to the manual rating factors affecting our Simplified LTD Rating (previously called Small Group rating and used only for groups under 20 lives). The proposed manual rating changes will become effective upon state approval.

The revised rating manual is included with this memorandum in support of the rate changes.

**(2) Brief Description of Benefits**

The Long Term Disability plan is intended to provide partial replacement of earnings to an employee who becomes disabled for an extended period of time as a result of an injury or sickness.

An employee is considered "totally disabled" if the he/she is precluded from performing all the material duties of his/her regular occupation during the defined elimination period and for the first  $n$  months for which this benefit is payable. Afterwards, the employee must be precluded from performing all the material duties of any occupation for which he/she is qualified, or may be reasonably qualified by training, education, or experience.

The typical benefit amount options available under this program are 60% or 65% of an employee's earnings up to the defined benefit maximum. In order to prevent over-insurance, it is standard practice to reduce the amount of the Group LTD benefit by all or a portion of the disability benefits which the disabled employee is entitled to receive as a result of his/her disability from any state/federal disability or retirement plan, Social Security law, Workers' Compensation Law, and any group insurance plans.

Coverage as defined under the policy is subject to a pre-existing condition limitation, if the disability resulted from conditions present prior to the effective date of the LTD coverage. However, coverage may include a limited pre-existing condition benefit for disabilities occurring within the pre-existing condition exclusion period and arising from pre-existing conditions.

**(3) Rate Development and Proposed Rating Changes:**

The gross rates for this program are determined as follows:

Gross Rate = Base Rate \* Case Size Factor \* SIC Factor \* Voluntary Factor

Proposed Changes:

- a. **Case Size Factors:** LTD Small Group product availability will be extended to groups over 20 lives. Larger groups will be discounted as follows:

Eligible Lives	Rating Factor
2-9	1.00

10-19	0.90
20-29	0.75
30-49	0.70
50+	0.65

The discount factors for 20+ lives were derived using the rate relativities produced by our standard LTD rate manual and reflect the lower claim costs, case size factors, and expense loads for larger groups.

- b. **Voluntary Factor:** a factor of 2 will be applied when coverage is employee paid. This factor was derived using the rate relativities produced by our standard LTD rate manual and reflects the pricing differential between the non-contributory and voluntary business due to participation loads and the difference in expense loads. Other funding arrangements may merit separate consideration.
- c. **SIC Categories:** Some revisions were made to the SIC categories table, expanding eligibility to several SICs previously not eligible for coverage.

The rates shown in the attached rate manual are applicable to the standard plan design options for the LTD Small Group product. Pricing for other plan design options can be determined using the rate relativities produced by our standard LTD rate manual. When warranted, additional rating adjustments may be made by home or field office underwriting to reflect case specific underwriting considerations.

Rates in the attached rate manual assume standard commissions of 25% the first year, and 15% thereafter. First year commissions are assumed to be amortized over 5 years. Rates for other commission options will be adjusted accordingly.

### **Applicability**

These changes will be applicable to new policies; there's no rate impact to the current policy holders.

### **Renewability Provision**

This policy is guaranteed renewable.

### **Marketing Method**

This Policy is marketed to employer/employee groups by licensed brokers.

### **Underwriting Method**

This policy is subject to general case underwriting. Claim cost adjustments by duration from Issue are not applicable to this policy.

### **Issue Age Limits**

Premiums under this policy are determined on an attained age basis. Because this is a Group policy, there are no issue restrictions by age.

### **Interest Rate Assumptions**

Interest rate assumptions were not used in pricing this policy.

**Trend Assumptions**

Trend assumptions were not used in pricing this policy.

**Persistency**

Given the nature of the benefits provided under the above policy form, persistency assumptions are not applicable for pricing purposes.

**(4) Actuarial Certification**

This filing, to the best of my knowledge and judgment, is in compliance with the applicable laws and regulations of this State, and I certify that premiums are reasonable in relation to the benefits provided.

A handwritten signature in dark ink, appearing to read 'D. Romanov', with a long horizontal flourish extending to the right.

---

Daria Romanov, FSA, MAAA  
Group Pricing Actuary  
December 18, 2013